DOCUMENT RESUME

ED 055 387 EC 040 151

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TITLE Introduction to Young Exceptional Children: A Guide for Paraprofessionals. Vol. 1, No. 6.
INSTITUTION Texas Univ., Austin. Dept. of Special Education.
SPONS AGENCY Bureau of Education for the Handicapped (DHEW/OE), Washington, D.C.
PUB DATE 71
NOTE 17p.

EDRS PRICE MF-$0.65 HC-$3.29
DESCRIPTORS *Childhood Needs; *Classification; *Exceptional Child Education; Guidelines; *Handicapped Children; Nonprofessional Personnel

ABSTRACT

The guide presents, in simple language, a basic introduction to exceptional children for paraprofessionals. Outlined are some of the basic needs of exceptional children, including needs which he has in common with all children. Presented are three examples of children with various handicaps to show who exceptional children are. Progress in caring for and educating handicapped children is noted and the eight major categories into which special education has classified these children are defined (mentally retarded, visually handicapped, aurally handicapped, physically handicapped, speech impaired, special health problems, emotionally disturbed, and learning disabled). (KW)

ED055387

THE UNIVERSITY OF TEXAS AT AUSTIN

Program for Staff Training of Exemplary Early Childhood Centers for Handicapped Children

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P R E S E N T S

THE DISTINGUISHED STAFF TRAINING MONOGRAPH SERIES

Introduction to Young Exceptional Children: A Guide for Paraprofessionals

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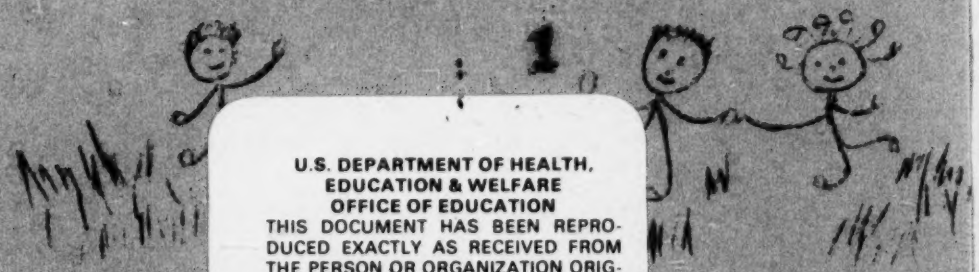
Vol. I No. 6

EC 040 151



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Today large numbers of children have special problems for which they need special help. Getting help early in life can give a child the right boost to prevent the side effects that go along with a disability. Being disabled or "different" is very hard for a child. It is even harder when the child is not given the love, care and training that he needs to help him.

The young exceptional child is a child like all other children, and

1. NEEDS TO KNOW HE BELONGS

2. NEEDS TO FEEL THAT PEOPLE LIKE HIM

3. NEEDS TO FEEL SECURE

4. NEEDS TO FEEL GOOD ABOUT HIMSELF

so that he can

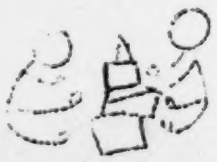
1. DEVELOP GOOD EATING HABITS.

2. LEARN TO DRESS HIMSELF.

3. SHOW SELF CARE IN HIS BATHROOM ROUTINE.

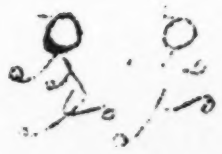
4. REST AND SLEEP PROPERLY.

5. PLAY WITH OTHER CHILDREN AND SHARE TOYS.



The exceptional child needs to learn through play. He should have fun. This is the natural way for children to develop their bodies and their minds through

1. MOVEMENT IN SPACE: JUMPING, WALKING, RUNNING, CRAWLING AND BALANCING.



2. USING THEIR HANDS AND FINGERS TO HOLD, PAT, PUSH, PULL, SQUEEZE.

3. DISCOVERING AND EXPLORING MATERIALS BY USING THEM.

4. USING TOYS SUCH AS DOLLS, DRESS-UP CLOTHES, BLOCKS, CARS, BOXES, CANS TO PRETEND OR TO BUILD OR TO MOVE.

5. USING TRICYCLES, WAGONS, LOGS, RUBBER TIRES FOR BIG MOVEMENT PLAY.

The exceptional child needs to learn to solve problems and think for himself by

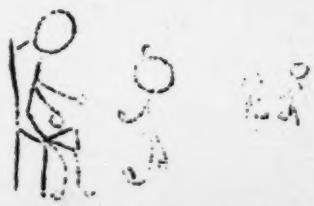
1. DOING AS MUCH FOR HIMSELF AS POSSIBLE EVEN IF IT TAKES A LONG TIME.

2. MAKING UP HIS MIND ABOUT WHAT HE WANTS TO DO.

3. ASKING QUESTIONS FOR INFORMATION ABOUT "WHAT" AND "WHY" SO HE CAN LEARN ABOUT ANSWERS.

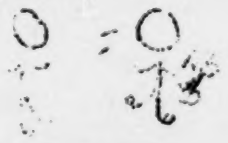
The exceptional child needs to develop language by

1. LISTENING TO OTHERS TALK.



2. HAVING SOMEONE TALK JUST TO HIM--TAKING UP TIME WITH HIM.

3. HAVING A CHANCE TO TALK A LOT SO HE CAN PRACTICE THE WORDS HE HAS LEARNED.



4. HAVING SOMEONE LISTEN TO HIM WHEN HE TALKS.

5. TALKING TO OTHER CHILDREN.

All of these things are things that any child needs to help him grow into a happy person. An exceptional child has the right to be happy as well as to have help in overcoming his handicaps. He may need special equipment such as braces, crutches, hearing aids, glasses, balance chairs. He may need special spoons and plates that are weighted so they will not slide. He may need special medicine to keep him from having seizures. He may need several different people to work with him to help him learn to walk, to talk, to use his equipment to be able to get along with himself and with others, and to grow up.

A look at some of the children in special education will help to show who exceptional children are. These children <u>are</u> special education because they are the ones who make this a field of special interest and need.

Gregory was born with a shortened and detached lower leg bone so that his leg could not grow. Gregory was one of a family of eleven children, all on public relief. Much of his young life was spent hiding in the woods in

back of his house with his brothers and sisters trying to get away from parents who whipped him. Gregory was picked up by the welfare department and taken to a medical center for treatment. He spent two years there, during which time his useless limb was removed and he was fitted with an artificial leg and taught to walk upright for the first time. Gregory was also placed in a nursery school program. Gregory learned rapidly with the individual attention he was given. He also was given help in relieving the bitterness and hatred he felt toward his family and himself. Today he is in a regular school class, lives in a foster home, and is building a better life for himself.

Mark was a premature baby. He has brain damage that resulted in a speech problem as well as inability to walk. His parents were so upset over his condition that they both had to have psychiatric care. Meanwhile Mark developed severe emotional

problems and became withdrawn into his own little world. At age five he was enrolled in a program for handicapped children in which many student teachers were able to help him. It took a long time to get him to pay attention to his surroundings but with patience and hard work on the part of everyone Mark was helped. He is now in a special class and has learned to read. He also has started walking and enjoys playing with the other children.

Susie is a little girl who is mentally retarded as well as having many other handicaps. When she was four years old she started in a pre-school program at a Rehabilitation Center. When Susie first came to school she was afraid of everything and she would not let anyone touch her. After a long time Susie learned to play and get along with other people. She learned to take care of herself in the bathroom. She is in a special class now. Susie still cannot read but she is a happy child and will grow up to be a good citizen.

These are just a very few of the <u>five million school</u>

age children in the United States who have some kind of handicap that requires some kind of special school planning. The estimates of pre-school children who need help are several million more. The most recent surveys show that there are 1,250,000 children now enrolled in special programs in this country. These include public and private facilities, both day and residential. This means that only about 1 out of 4 children who need special education is getting it. We can safely say that we have a long way to go in providing help for these children.

We can also say that there has been considerable progress made through the centuries in care for the disabled.

In the early years of recorded history, the physically and mentally disabled, if they survived birth, were destroyed shortly afterwards either by their families or by a counsel of elder citizens.

Since then we have passed through the years when the disabled person was exploited as a buffoon or court jester; and then the years in which they were regarded as being possessed of evil spirits; and then the years in which they were used as professional beggars.

We have come through the early Christian era when the movement began for protection and pity for the disabled.

We are in a period now of accepting the handicapped as worthy and worthwhile human beings and of merging them into the mainstreams of life. The trend is now to educate the exceptional child with his peers to whatever extent he is compatible with them and to whatever extent he can achieve his fullest development.

In our country there was no such thing as special education before the 1800's. For the next 100 years there was a movement toward residential and institutional care for the disabled. The public school movement began in the early 1900's and since then special education in

its various forms has spread to every state. It It has been underwritten by state laws, supported by public money and by private foundations, and is encouraged by the Federal Government in the form of grants for research and teacher training.

It has been observed by sociologists that the best indicator of the maturity of a society is the attention it pays to its handicapped, and its underprivileged. By this standard we have made more progress in the past 15 years than we did in all the centuries before. The historic reason for this lies in the upsurge of interest in the disabled following the Second World War. The U. S. Government sent out a request at that time that motion pictures, magazines, news articles, etc., begin to include persons with physical and mental handicaps so that the public could get used to seeing the war wounded. At the same time the trend of rehabilitation and restoration to

near-normal grew so that many of these people melted back into society rather than becoming dependent upon it. This extended downward to include school age children and as a result the public is far more receptive to disabled children and their education than ever before. Recently people have realized the need to begin helping the pre-school exceptional child. We know that children who receive education and rehabilitation commensurate with their abilities can become effective and contributing members of society rather than a drag on it. We know, too, that special education and rehabilitation have to run to catch up with the population. Instead of decreasing the numbers of mentally retarded and physically disabled, there is an increase, due to medical and surgical advances in keeping alive children who would not have made it in earlier times. The U. S. Health Office recently estimated that by the time the next generation grows up there will be one chronically ill or disabled (this

includes all age groups, not just children) dependent upon every able bodied American worker if something is not done to make these people employable. We are now spending in American tax money some $700 million a year on care for the disabled of all age groups. Social Security benefits alone to individuals disabled since childhood amount to $7 million a month.

We know that custodial care is at least 5 to 10 times as expensive as special education cost per year. And, too, with custodial care there is no return to society - but with education the individual has the potential for returning in employment far more than is spent in providing him with schooling. Special education is more than a humanitarian area, it is becoming an economic necessity. It is a way of conserving human resources.

We have said that several million children

need help. Special education has classified these children into eight major categories. Teachers and therapists are the trained specialists who work with these children in an educational setting.

These classifications include:

(1) The mentally retarded of which we consider the custodial, the trainable, and the educable children. These children are slow in developing. As young children they may have poor speech or no speech. They are at different levels of intelligence so that some learn more slowly than others.

(2) The visually handicapped including the blind and partially sighted. These children will learn through their other senses and should have the opportunity for playing and talking and moving around as well as any other child.

(3) The auditorily handicapped including the deaf and hard of hearing. These children will have poor speech or no speech. They need to learn to care for themselves, to wear their hearing aides, to learn to talk, and to

know about things around them.

(4) The orthopedically handicapped including all types of crippling and also including the cerebral palsied. These children may have trouble walking. They may use braces and crutches or wheelchairs. Their arms and hands may be crippled. The cerebral palsied children often have speech problems as well as body problems.

(5) The speech impaired child with all sorts of difficulties--language, voice, articulation, rhythm. These children need special help to correct their ways of talking. They should have a chance to practice what they learn in speech therapy.

(6) Children with special health problems such as asthma, heart disease, or allergies. These children may need medicine. They may need special food to eat. They may have to rest a long time each day. These things are all prescribed by

their doctors.

(7) The emotionally disturbed and socially maladjusted children whose behavior is hard to deal with. These children may be very noisy and even destructive. Or they may be withdrawn and too quiet.

(8) The learning disabilities children. These children may have difficulty in paying attention, sitting still, using their muscles smoothly, or keeping up with the other children although they are not retarded or disturbed.

There are many exceptional children who fall into two or more of these categories instead of just one. There are many sub-classifications and there are many kinds of disability. Those working with exceptional children have a broad background of knowledge in several areas of exceptionality. They should especially understand how children grow and learn. When people help young children those people are paving the way for a better world of today and tomorrow.

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